

Please Type or Print in Ink  
Mail to: P.O. Box 309522  
Montgomery, Al 36130

ALABAMA BOARD OF FUNERAL SERVICE  
APPLICATION  
FOR PERMANENT LICENSE AS EMBALMER

FORM- EMB

04-2014

Name: \_\_\_\_\_  
(First) (Middle) (Last)

Residence Address: \_\_\_\_\_  
(Street & No. / P.O. Box) (City, State Zip)

Business Address: \_\_\_\_\_  
(Street & No. / P.O. Box) (City, State Zip)

Telephone Number: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

EMAIL Address: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

I graduated from \_\_\_\_\_ (Mortuary School). Date of Graduation: \_\_\_\_\_

Attach herewith a transcript or certificate of graduation from the above school.

Name and Address of Funeral Establishment where employed:

\_\_\_\_\_  
(Name) (Street & No. / P.O. Box) (City, State Zip)

I hereby certify that I am presently qualified by training and experience as prescribed by Title 34, Chapter 13 to receive the license hereby applied for. Under the provision of §34-13-91 and 92 of the Code, I submit the following data as to training and experience as an Apprentice Embalmer:

Name and Address of Funeral Establishment at which training was received:

\_\_\_\_\_  
(Name) (Street & No. / P.O. Box) (City, State Zip)

Trained from: \_\_\_\_\_ to \_\_\_\_\_

Name and Address of Funeral Establishment at which training was received:

\_\_\_\_\_  
(Name) (Street & No. / P.O. Box) (City, State Zip)

Trained from: \_\_\_\_\_ to \_\_\_\_\_

Date of breaks in training within the past three years of which waiver of training time was requested and the reason thereof:

\_\_\_\_\_ to \_\_\_\_\_ Reason: \_\_\_\_\_

Have you ever been convicted of a felony or misdemeanor, other than a traffic violation? ☐ YES ☐ NO If yes, please attach details.

Affidavits required by §34-13-91 are attached hereto and made a part of this application.

I certify that I am a citizen of the United States or legally present in the United States? ☐ YES ☐ NO

I hereby apply for license as an EMBALMER for the fiscal year ending September 30, 20\_\_\_\_ and in support of such application submit and attest to the information and data supplied herewith. I also attach herewith application fee of **\$100.00**. I have read and understand the provisions of Title 34, Chapter 13, Code of Alabama, 1975, which govern the issuance and maintenance of the License requested. **I UNDERTSAND THAT ANY FALSE STATEMENT GIVEN HEREIN WILL SUBJECT MY LICENSE TO REVOCATION.**

\_\_\_\_\_  
(Signature of Applicant)

Subscribed and sworn to before me, a Notary in the State of Alabama this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Seal

\_\_\_\_\_  
Notary Public

My Commission expires \_\_\_\_\_.